



THE UNITED STATES PATENT AND TRADEMARK OFFICE

Group Art Unit: 2177  
Examiner: Greta Lee Robinson

In re Application of: Charles A. Hanson et al.  
Title: Special Device Access to Distributed  
Data  
Serial No.: 09/495,492

Filed: February 1, 2000  
Docket No.: UNI6-BI57 / 04MV1093  
Customer # 27516

Date: November 6, 2003

Commissioner of Patents  
P O Box 1450  
Alexandria, VA 22313-1450

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Technology Center 2100

AMENDMENT TRANSMITTAL

Sir:

Transmitted herewith is an amendment and replacement of FIG. 1 for this application.  
Applicant is other than a small entity.

EXTENSION OF TERM

The proceedings herein are for a patent application and the provisions of 37 C.F.R. §1.136 apply.

- (a) ☒ Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)-(d)) for the total number of months checked below:

Extension Fee for other than  
(months) small entity

- |   |            |
|---|------------|
| <input checked="" type="checkbox"/> one month | \$ 110.00  |
| <input type="checkbox"/> two months           | \$ 420.00  |
| <input type="checkbox"/> three months         | \$ 950.00  |
| <input type="checkbox"/> four months          | \$1,480.00 |
| <input type="checkbox"/> five months          | \$2,010.00 |

Fee \$ 110.00

If an additional extension of time is required, please consider this a petition therefore.

- ☐ An extension for \_\_\_ months has already been secured and the fee paid therefore of \$\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$110.00

- (b) ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that Applicant has inadvertently overlooked the need for a petition for extension of time.

### FEES

The fee for Claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

FEE FOR CLAIMS CALCULATION			
Claims Remaining After Amendment	Highest No. Previously Paid For	Rate	Additional Fee
Total Claims ____ -	(if < 20, enter 20) ____ = ____ X	\$18.00	\$
Independent Claims ____ -	(if < 3, enter 3) ____ = ____ X	\$86.00	\$
First Presentation of Multiple dependent claims if any +			\$
Filing fee calculation			\$

- ☒ Total additional fee for Claims required **\$110.00**  
☐ No additional fee for claims is required.

### FEE PAYMENT

Please charge Account No. 19-3790 the sum of **\$110.00**. If any additional extension and/or fee or any additional fee for claims is required, charge Account No. 19-3790.

A duplicate of this transmittal is attached.

Respectfully submitted,

Beth L. McMahon 11/6/2003  
Beth L. McMahon  
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I hereby certify that this correspondence is being deposited in the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, P O Box 1450, Alexandria, VA 22313-1450 on November 6, 2003.

Beth L. McMahon  
Attorney for Applicants  
Beth L. McMahon  
Signature

November 6, 2003